Use this form for general report and committee information, must be signed and submitted along with other detailed forms.  Do not use this form to update information								
1. Committee Information								
a. Fuli Name	c. ID Number							
SCIPPIO FOR EAST	T WARD							
b. Mailing Address (inclu	d. Date Filed							
3335 New Walkerton Winston Salem NC	07/25/2025							
						e. Phone Number		
						336 529 1749		
2. Report Year 3. Period Start Date (mm/dd/yy) 4. Period End Date (mm/dd/yy) 5. Treasurer Full Name								
2025	01/01/2025		06/3	30/2025	Annette Scippio			
6. Type of Committee		9. Typ	e of Report	: (check	only one type of repor	t from one category)		
Candidate Campai		Munici			te/County	Referendum		
PAC	Referendum		Organizational	ı 🗆	Organizational	Organizational		
Independent Expenditure Legal Expense Fu	Joint Fundraiser		Thirty-five day	y	Quarterly	Pre-referendum		
7. Type of Fund	(if applicable, check one)		Pre-primary		First	Final		
"Booster Fund"	10 11	17	Pre-election	١Ħ	Second	Supplemental Final		
Building Fund			Pre-runoff	١Ħ	Third	Annual 2		
		-	Semi-annual		Fourth	Special		
			Mid Year	r	Semi-annual	- American American		
Other:			Year End	ı 📗	Mid Year	10. Special Report Name		
p			Final		Year End	U OI		
8. Number of Fundr	aisers this Report		Special		Final			
	0				Special	anged and the second		
11. Account Informa	3. 1.				nt Information			
a. Financial Institution Fu	ll Name			a. Financial	Institution Full Name	GO .		
M&F Bank						1		
b. Purpose Campaign	c. Account Code			b. Purpose		c. Account Code		
Contribution	S4E	W						
~onu loution		ance						
and	d. Period Begin Balance	e				d. Period Begin Balance		
_	d. Period Begin Balance \$ 137.71	2				d. Period Begin Balance		
and		e						
and Expenses  CERTIFICATION I certify that the Comi	\$ 137.71	ance wit	h all applica	ble provision	as of Article 22A, 22B.	\$ & 22D-22M of Chapter 163 of		
and Expenses  CERTIFICATION I certify that the Common the NC General Statut	\$ 137.71  nittee or Fund is in complies and that no funds are co	ance wit	ed with proh	ibited or oth	er non-disclosed funds.			
CERTIFICATION I certify that the Common the NC General Statut is complete, true and complete.	\$ 137.71  mittee or Fund is in complies and that no funds are coorrect and that I have been	ance wit	ed with proh	ibited or oth	er non-disclosed funds. of Elections.	\$ , & 22D-22M of Chapter 163 of . I further certify that this report		
and Expenses  CERTIFICATION I certify that the Common the NC General Statut	\$ 137.71  mittee or Fund is in complies and that no funds are coorrect and that I have been pio	ance wit	ed with prohiby the NC S	ibited or oth tate Board o Melle	er non-disclosed funds. of Elections. ,	\$ & 22D-22M of Chapter 163 of		
and Expenses  CERTIFICATION I certify that the Community the NC General Statut is complete, true and community Annette Scip	\$ 137.71  mittee or Fund is in complies and that no funds are correct and that I have been pio  Printed Name of Signer	ance wit	ed with prohiby the NC S	ibited or oth tate Board o Melle	er non-disclosed funds. of Elections.	\$ , & 22D-22M of Chapter 163 of . I further certify that this report		
and Expenses  CERTIFICATION I certify that the Common the NC General Statut is complete, true and complete Annette Scip  FOR OFFICE USE ON	\$ 137.71  mittee or Fund is in complies and that no funds are correct and that I have been pio  Printed Name of Signer	ance wit	ed with prohiby the NC S	ibited or oth tate Board o Melle	er non-disclosed funds. of Elections. ,  Sulfful ointed Treasurer	\$ , & 22D-22M of Chapter 163 of . I further certify that this report  July 25, 2025  Date		
and Expenses  CERTIFICATION I certify that the Community the NC General Statut is complete, true and community Annette Scip	\$ 137.71  mittee or Fund is in complies and that no funds are correct and that I have been pio  Printed Name of Signer	ance with mmingles trained	ed with prohiby the NC S	ibited or oth tate Board o Melle	er non-disclosed funds. of Elections. ,  Sulfful ointed Treasurer	\$ , & 22D-22M of Chapter 163 of . I further certify that this report July 25, 2025		
and Expenses  CERTIFICATION I certify that the Common the NC General Statut is complete, true and complete Annette Scip  FOR OFFICE USE ON	\$ 137.71  mittee or Fund is in complies and that no funds are correct and that I have been pio  Printed Name of Signer	ance with mmingles trained	ed with proh by the NC S Si	ibited or oth tate Board o Melle	er non-disclosed funds. of Elections. ,  Sulfful ointed Treasurer	\$  , & 22D-22M of Chapter 163 of  I further certify that this report  July 25, 2025  Date  Delivery Method  Normal Mail  Registered Mail		
and Expenses  CERTIFICATION I certify that the Community that the Community that the Community that the NC General Statut is complete, true and community Annette Scip  FOR OFFICE USE ON Date Received:	\$ 137.71  mittee or Fund is in complies and that no funds are correct and that I have been pio  Printed Name of Signer	ance wit mmingle trained	ed with proh by the NC S Si Employee:	ibited or oth tate Board o Melle	er non-disclosed funds. of Elections. ,  Sulfful ointed Treasurer	\$  . & 22D-22M of Chapter 163 of . I further certify that this report  July 25, 2025  Date  Delivery Method  Normal Mail Registered Mail Hand Delivered Electronically Filed		
and Expenses  CERTIFICATION I certify that the Common the NC General Statuting is complete, true and common Annette Scip  FOR OFFICE USE ON Date Received:  Date Postmarked:	\$ 137.71  mittee or Fund is in complies and that no funds are correct and that I have been pio  Printed Name of Signer  ILY	ance wit mmingle trained	ed with proh by the NC S Si Employee:	ibited or oth tate Board o Melle	er non-disclosed funds. of Elections. ,  Sulfful ointed Treasurer	\$  , & 22D-22M of Chapter 163 of . I further certify that this report  July 25, 2025  Date  Delivery Method  Normal Mail Registered Mail Hand Delivered		
and Expenses  CERTIFICATION I certify that the Common the NC General Statut is complete, true and condense Annette Scip  FOR OFFICE USE ON Date Received:  Date Postmarked:  Date Scanned:  Date Data Entered	\$ 137.71  mittee or Fund is in complies and that no funds are correct and that I have been pio  Printed Name of Signer  ILY  form cannot be used to am	ance with the mind of trained	Employee: Employee: Employee: Employee:	ibited or oth state Board of App	er non-disclosed funds of Elections. ,  Surfue Connect Treasurer  as the committee address	\$  . & 22D-22M of Chapter 163 of . I further certify that this report  July 25, 2025  Date  Delivery Method  Normal Mail Registered Mail Hand Delivered Electronically Filed Signer has not received		
CERTIFICATION I certify that the Common the NC General Statut is complete, true and Cannette Scip  FOR OFFICE USE ON Date Received:  Date Postmarked:  Date Scanned:  Date Data Entered  Please Note: This	\$ 137.71  mittee or Fund is in complies and that no funds are correct and that I have been pio  Printed Name of Signer  ILY  form cannot be used to am	ance with mmingle trained trained tend com	Employee: Employee: Employee: Employee: Employee:	ibited or oth state Board of Apple of A	as the committee address of information.	\$  , & 22D-22M of Chapter 163 of . I further certify that this report  July 25, 2025  Date  Delivery Method  Normal Mail Registered Mail Hand Delivered Electronically Filed Signer has not received mandatory training  ess, treasurer, assistant treasurer,		

CRO-1000

**Disclosure Report Cover** 

Amendment

Yes

 $\boxtimes$ 

No

Amendment  $\boxtimes$ Yes No

**Detailed Summary**Use this form to summarize all disclosure reporting forms and to total monetary information.

1. Committee Full Name (and Fund if applicable)		3. ID Number		
SCIPPIO FOR EAST WARD	2. Type of Report Mid Year 2025		J. I.	
Start of Election Cycle: January 1,	2023	Total this Reporting Perior	Total this d Election Cycle	
4) Cash on Hand at Start		\$ 137.71	\$ 0	
RECEIPTS				
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 0	\$ 475.00	
6) Contributions from Individuals	(CRO-1210)	\$ 0	\$ 13425.00	
7) Contributions from Political Party Committees	(CRO-1220)	\$ 0	\$ 0	
8) Contributions from Other Political Committees	(CRO-1230)	\$ 0	\$ 500.00	
9) Loan Proceeds	(CRO-1410)	\$ 0	\$ 0	
10) Refunds/Reimbursements To the Committee	(CRO-1240)	\$ 0	\$ 190.00	
11) Other Receipt Sources				
11a) Interest on Bank Accounts	(CRO-1250)	\$ 0	\$ 0	
11b) Contributions from Not-for-Profit Organization	ons <i>(CRO-1250)</i>	\$ 0	\$ 0	
11c) Outside Sources of Income	(CRO-1250)	\$ 0	\$ 0	
11d) Legal Expense Fund – Other Sources	(CRO-1270)	\$ 0	\$ 0	
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$ 0	\$ 0	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c	c, 11d and 11e)	\$ 0	\$ 14490.00	
<u>EXPENDITURES</u>				
13) Disbursements				
13a) Operating Expenditures	(CRO-1310)	\$ 137.71	\$ 13788.97	
13b) Contributions to Candidates/Political Committee	tees (CRO-1310)	\$ 0	\$ 0	
13c) Coordinated Party Expenditures	(CRO-1310)	\$ 0	\$ 0	
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$ 0	\$ 260.43	
15) Loan Repayments	(CRO-1420)	\$ 0	\$ 0	
16) Refunds/Reimbursements From the Committee	(CRO-1320)	\$ 0	\$ 0	
17) In-Kind Contributions	(CRO-1510)	\$ 0	\$ 441.00	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15		\$ 137.71	\$ 14490.40	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtr	ract line 18)	\$ 0	\$ 0	
ADDITIONAL INFORMATION				
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$ 0		
21) Outstanding Loans (incl. ones from other campaigns	s) (CRO-1430)	\$ 0	visit in a line	
22) Debts and Obligations owed By the Committee	(CRO-1610)	\$ 0		
23) Debts and Obligations owed To the Committee	(CRO-1620)	\$ 0		
24) Account Transfers Within the Committee	(CRO-1720)	\$ 0		
25) Administrative Support	(CRO-1710)	\$ 0	\$ 0	
26) Forgiven Loans	(CRO-1440)	\$ 0	\$ 0	
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$ 0	\$ 0	
28) Contributions to be Refunded	(CRO-1215)	\$ 0	\$ 0	

Disbursements Use this form to report a war literal from the	iu. Communi	Pg <u>1</u>	of		Amen	Yes	$\boxtimes$	No
Use this form to report expenditures from the comm committees and coordinated party expenditures.	intee for; operating exp	enses, co	ntributions to	candid	ate/politic	cal		
1. Committee Full Name (and Fund if applicable	)				2. ID N	umber		J. 17E
SCIPPIO FOR EAST WARD								
3. Type of Disbursement (Please use separate	CRO-1310 forms for	each type	of Disburse	ment.)				. "
Operating Expenses Contributions to	Candidates/Political Commit	tees		Coordinate	ed Party Exp	enditures		
4. Payee Information	Add		Remove				T You	
a. Full Name, Mailing Address & Phone	b. Coordinated Comm	ittee Name		d. Co	omments			
(include city, state, & zip)								
M&F BANK								
	c. Level Registered (Sr	pecify)						

SCIPPIO FOR				-	0.000		
3. Type of Disb			CRO-1310 forms for		The same of the sa		
Operating I		Contributions to Ca	andidates/Political Comm	ittees		Coordinated Party Expenditures	
4. Payee Inform			Add Remove				
	ing Address & Phone		b. Coordinated Com	mittee N	ame	d. Comments	
(include city, state, M&F BANK	& zip)		-				
WIGE DAINK			Y 170 1 2 200	~			
			c. Level Registered (S	specify)			
			Federal		County:	DI C C / D /	
			State		Municipality:	e. Election Sum to Date	
						\$ 123.76	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)		j. Amount	k. Required Remarks	
S4EW	electronic	О	01/31/25		\$6.00	service charge	
S4EW	electronic	О	2/28/25		\$6.00	service charge	
4. Payee Inform	nation		Add		Remove		
a. Full Name, Maili	ing Address & Phone		b. Coordinated Com	nittee N	ame	d. Comments	
(include city, state,	& zip)						
M&F BANK							
			c. Level Registered (S	pecify)			
			Federal		County:		
			State		Municipality:	e. Election Sum to Date	
						\$ 129.76	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yy	уу)	j. Amount	k. Required Remarks	
S4EW	electronic	О	3/31/2025		\$6.00	service charge	
					\$		
4. Payee Inform	ation		Add		Remove		
a. Full Name, Maili	ng Address & Phone		b. Coordinated Committee Name			d. Comments	
(include city, state,							
NC Board of Ele	ections						
PO Box 27255			c. Level Registered (Specify)				
Raleigh, NC 276	511		Federal		County:		
			State		Municipality:	e. Election Sum to Date	
						\$ 100.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyy	yy)	j. Amount	k. Required Remarks	
S4EW	check	J	04/23/2025		\$50.00	late fee	
					\$		
5. Total only thi				/le ii ii		\$ 68.00	
	CRO-1310 Pages	371					
			0 if Operating Expenses)			¢ 127.21	
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)  \$ 137.31							
			0 if Coordinated Party Ex	penditu	res)		
	es (List detailed exp						
A* - Media	B* - Printing F* - Equipment	C* - Fund			D - To Anoth		
E - Salaries I - Postage O* - Other				g Public Office Expenses on to Legal Expense Fund			
	detailed explanati	on in required re	emarks field (k)				

-									Amendment	
Disbursements					Pg	2	of	2	☐ Yes 🖂	No
** A	 _	-	_	_	0	_			1	

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures.

1. Committee I	Full Name (and Fun	d if applicable)		No. 1 of	2. ID Number
3. Type of Dish			CRO-1310 forms for each t	ype of Disbursen	ient.)
Operating I		Contributions to Ca	andidates/Political Committees		oordinated Party Expenditures
4. Payee Inform			Add	Remove	A TOTAL TOTAL
	ing Address & Phone		b. Coordinated Committee N	ame	d. Comments
(include city, state,	, & zip)				
Office Depot					
1235 Silas Cree	•		c. Level Registered (Specify)		
Winston-Salem	, NC		Federal	County:	
			State	Municipality:	e. Election Sum to Date
					\$ 468.55
f. Account Code	g. Form of Payment	h. Purpose Code	1.004 ( /11/ )		
1. Account Code	g. Form of rayment	n. I ui pose coue	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
S4EW	credit card	K	02/08/2025	\$69.31	paper, envelope
				\$	
4. Payee Inform	nation		Add	Pamava	L
	ing Address & Phone		b. Coordinated Committee N	Remove	d. Comments
(include city, state,	*		b. Cool dinated Committee 14	ame	d. Comments
(include city, state,	cc zipj		-		
			c. Level Registered (Specify)		
			Federal	County:	
			State	Municipality:	c. Election Sum to Date
				within cipality.	
					\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
				e	
				\$	
				\$	
4. Payee Inform			Add	Remove	
	ng Address & Phone		b. Coordinated Committee Na	ime	d. Comments
(include city, state,	& zip)		-		
			T 18 14 16 14		
			c. Level Registered (Specify)		
			Federal	County:	
			State	Municipality:	e. Election Sum to Date
					\$
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
	5. A VIAN OI L AJIMONT	F 10000	vace (mm/uu/yyyy)	7. vzmonie	w wednii en wemsiks
				\$	
				\$	
5. Total only thi	is Page				\$ 69.31
6. Total of ALL	CRO-1310 Pages				
	line 13a of Detailed Sum				¢ 127.21
			0 if Contrib to Candidates/Politice		\$ 137.31
			if Coordinated Party Expenditu	res)	
	es (List detailed exp				
A* - Media	B* - Printing	C* - Fund G - Politic		D - To Anothe	
E - Salaries I - Postage	F* - Equipment J - Penalties		Public Office Expenses n to Legal Expense Fund		
O* - Other	o i challes	K - OHE	ce Expenses	A Douarioi	i w regai exbense rand
	e detailed explanati	on in required re	emarks field (k)		